



State of New Hampshire
 Department of Energy
 21 S. Fruit Street, Suite 10, Concord, NH 03301-2429

STEP 2: REBATE APPLICATION
FOR OPERATIONAL NON-RESIDENTIAL BULK-FUEL FED WOOD PELLET
BOILERS AND FURNACES
REVISED 07-01-2021

Applicants who choose to install systems, in whole or in part, prior to approval by the Department of Energy may still apply for this rebate payment by submitting both the Step 1 and Step 2 applications, but the rebate payment is conditioned on meeting the requirements listed in both the Step 1 and Step 2 applications and subject to available funding.

Please submit application and all associated documents to:
 New Hampshire Department of Energy
 Sustainable Energy
 21 S. Fruit Street, Suite 10
 Concord, NH 03301-2429

Because this application requires original signatures, paper copy submission is required

APPLICANT INFORMATION			
Business/Organization Name		Contact Name	
Mailing Address		City	State Zip
Facility Address (if different)		City	State Zip
Telephone	Cell		
Email Address		County	

INSTALLED SYSTEM INFORMATION					
Date the System Became Operational (must be on or after July 9, 2016)	Serial Number of the Appliance	Step 1 approval received from Department of Energy?		Are all major components new?	
		YES	NO	YES	NO
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Only new systems using new major components are eligible for rebate funding.

If there were no changes in project equipment, system specifications, the Step 1 Project Cost Summary or other information included in the Step 1 application, check here and proceed to the Required Attachments on page 3.

CHANGES TO PROJECT INFORMATION

Describe in the space below any changes in the project equipment, system specifications, or other changes to the information provided in the Step 1 Rebate Pre-Approval Application.

REVISED PROJECT COST SUMMARY AND ADJUSTED REBATE CALCULATION

PROJECT COMPONENTS		Costs	
# Boiler or Furnace Appliance(s) Utilized by System	#		(# appliances x cost/appliance) Total Cost of Appliances
Cost per Appliance	\$	\$	
Fuel Storage Bin		\$	<i>Please provide cost breakdown for each of the project components listed.</i>
Controls & Circulators		\$	
Indirect Hot Water Heater		\$	
Labor		\$	
Carbon Monoxide Detector		\$	
Other*		\$	
REVISED TOTAL PROJECT COST		\$	\$
REBATE ADDERS			
Thermal Storage Tank	+ Tank Components	= Total Thermal Storage	Total Thermal Storage * 30% <i>up to a maximum of \$5,000, if applicable</i>
\$	\$	\$	\$
For systems over 500,000 Btu/hr, Thermal REC eligibility is required. A \$5,000 adder is available for all systems that are required to, or choose to, become Thermal REC eligible.			<i>Add \$5,000, if applicable</i>
			\$
REVISED TOTAL REBATE			\$

***The rebate covers the entire installed system, including pellet storage and conveyance, boiler or furnace, controls, thermal storage tank, and installation, up to the point where the system interconnects with the building's heat distribution system.**

REQUIRED ATTACHMENTS			
These items (copies) must be attached to the application:			Attached
1.	Paid invoice(s) indicating total costs for parts and labor.		<input type="checkbox"/>
2.	A paid-in-full invoice for one delivery of Pellet Fuels Institute certified wood pellets.		<input type="checkbox"/>
3.	Pictures of the installed heating system.		<input type="checkbox"/>
4.	Pictures of the installed bulk storage system, including a picture of the safety placard.		<input type="checkbox"/>
5.	Picture of the carbon monoxide detector (indoor storage only).		<input type="checkbox"/>
6.	Documentation of the rated BTU/hr of the system if not on file with the Department of Energy.		<input type="checkbox"/>
			On file <input type="checkbox"/>
7.	Documentation of thermal efficiency if not on file with the Department of Energy.		<input type="checkbox"/>
			On file <input type="checkbox"/>
8.	Evidence of participation in the EPA Portfolio Manager program or equivalent benchmarking program.		<input type="checkbox"/>
The licensed plumber, electrician, or fire department designee can initial and date the applicable box(es) provided, or provide a short letter.			Initials & Date
8.	Documentation that the installed system has been inspected by a local building code official or, if a boiler, a NH licensed plumber, or, if a furnace, a NH licensed electrician.		<input type="checkbox"/>
9.	Building permit or other documentation that the facility meets local zoning regulations (if none, please explain).		<input type="checkbox"/>
10.	System approval and sign-off from the municipal fire chief or designee or the State Fire Marshal or designee.		<input type="checkbox"/>

DECLARATION	
The Undersigned applicant declares under penalty of perjury that:	
<ol style="list-style-type: none"> The applicant has purchased and installed the heating system described above; The pictures included are of the applicant's installed system; The applicant will not sell or otherwise transfer the equipment unless as a part of a sale of the property for a period of 10 years; The information provided in both the Step 1 Rebate Pre-Approval Application and this Step 2 Rebate Request Application are true and correct to the best of the applicant's knowledge and belief; The applicant understands that program funds are limited and available on a first come, first serve basis; Submission of the Step 1 Rebate Pre-Approval Application guarantees the applicant's place in the funding queue for a period of nine months, after which the funding will be reallocated unless a one-time written extension has been approved by the Department of Energy; and, The applicant agrees that the system, installation, and documents supporting the application may be audited and inspected by the New Hampshire Department of Energy, and agrees to provide energy production data on the system for a period of ten (10) years if requested by the Department of Energy. 	
_____ Applicant Signature	_____ Date
Only one signature needed per business/organization.	
Subscribed and sworn before me this _____ (day) of _____ (month) in the year _____	
in the State of _____ County of _____	
_____ Notary Public/Justice of the Peace	
My Commission Expires: _____	

Page intentionally left blank

PAYMENT INFORMATION

Taxpayer ID Number (TIN) or Employer ID Number (EIN) or Social Security Number (SSN) is required for payment purposes. An IRS Form 1099, report of miscellaneous income, may be issued for this payment. We are asking for this information on a separate page to allow this personal information to be separated from the application and to be held confidentially at the Department of Energy’s offices or the office of the State Treasurer.

Applicants who do not provide their TIN, EIN, or SSN will not be eligible for any incentive payment. We thank you for your understanding.

Name *(only the name of the individual whose social security number is provided below.)*

Mailing Address	City	State	Zip
Telephone	Cell		
Email Address	Taxpayer ID Number (TIN) or Employer ID Number (EIN) or Social Security Number (SSN)		
Are you are registered as a State of New Hampshire Vendor?	Yes	No	If “yes,” list your NH vendor number below.
	<input type="checkbox"/>	<input type="checkbox"/>	

For questions regarding this rebate program, email ThermalRebates@energy.nh.gov, or call (603)271-3670.